

## **Centralized Class VIII Repair Parts Program and Procedures**

1. Repair parts for medical equipment encompass those components, supplies, and other materials necessary to facilitate unit and higher-level maintenance support of medical equipment. Medical equipment repair parts, though normally Class VIII or Class IX items, can include all supply classes where such parts or materials are required to perform maintenance services or equipment repairs to return an item to a fully mission capable status. Class VIII repair parts do not include accessories or consumable supplies i.e. pipettes, operator replaceable tubing or batteries, jars or collection containers, and so forth which should be provided and funded as part of the organizations' Unit Level maintenance program.
2. The US Army Medical Materiel Agency (USAMMA) operates a centralized medical repair parts program for Army organizations resourced within the authority of Modified Table of Organization & Equipment (MTOE). The purpose of the program is to provide an adequate and responsive Class VIII repair parts support contingency to support AMEDD MTOE organizations. The necessity to execute and manage a centrally managed Class VIII repair parts program within the AMEDD, particularly for MTOE organizations is required and essential to ensure deployable organizations with medical equipment are fully mission capable (FMC) upon deployment to support contingencies and combat operations.
3. The program's objective is to make available, to organizations with a field or sustainment maintenance capacity, the repair parts necessary to sustain deployable medical equipment in a fully mission capable (FMC) status. It has been determined that a contributing factor to TOE organizations not having an effective medical maintenance program has been the inability of repairers to obtain parts needed to maintain unit's medical equipment.
  - a. Prevalent problems associated with the Class VIII repair parts process include parts no longer available from original equipment manufacturer (OEM) and a lack of standardization causing supply chain unresponsiveness, both of which result in frequently rejected parts requests at the local level.
  - b. Utilization of in-house medical maintenance expertise within the supply chain has proven to reduce many repair parts difficulties. Moreover, the availability of a robust inventory of existing assets and a depot level cannibalization point, coupled with 25K Credit Card Authority, has proven to significantly improve repair parts supply chain responsiveness and customer satisfaction.
  - c. Measurable benefits realized at the unit level, above and beyond the availability of class VIII repair parts to support a comprehensive medical maintenance program, are reduced costs associated with minimum order requirements, as well as a reduction in man-hours required for investigation and research.
  - d. Additionally, the centrally managed Class VIII repair parts program facilitates the development of a central source of supply with a comprehensive information repository capable of providing invaluable repair parts utilization data to build push packages to support contingency operations.

4. The Centralized Class VIII Repair Parts Program is not intended to provide initial supply or resupply of PLL stocks and/or inventories.

5. Management of USAMMA's centralized medical materiel repair parts program will be in accordance with AR 710-1, Centralized Inventory Management of the Army Supply System; AR 710-2, Inventory Management Supply Policy Below the Wholesale Level; AR 40-61, Medical Logistics Policies and Procedures; DA PAMs 710-2-1 and 710-2-2.

6. The Centralized Class VIII Repair Parts Program will provide sustainment level maintenance repair parts support to Army MTOE organizations. Funding for repair parts support differs depending on whether the organization is operating in garrison as opposed to operating in contingency operation. In addition to the unit's operating status, funding is also dependant on the unit's component.

a. Contingency Operations. Due to extreme conditions, as well as the extraordinary operation tempo associated with contingency operations, the Department of Defense allocates separate operating budgets "theater dollars" to support contingency operations. The US Army Medical Materiel Agency Centralized Class VIII Repair Parts Program will provide any and all repair parts support requested on a **prepaid by theater** or reimbursable basis for MTOE units in **contingency operations**.

b. **Garrison Operations.** Funding for Repair Parts Support of MTOE units operating in **garrison** (not contingency operations) is further defined as follows:

(1) **Non-reimbursable** (Sustainment Maintenance Program)

(a) COMPO 1 (Active Army). Repair parts support for active Army MTOE organizations includes all direct, general, and depot level maintenance parts and support requirements while the organization is in garrison.

(b) COMPO 2 (National Guard). Repair parts support for Army National Guard organizations includes all direct, general, and depot level maintenance parts and support requirements while the organization is in garrison.

(c) COMPO 3 (Army Reserve).

1) Reserve Component Hospital Decrement (RCHD). Repair parts support for the USAMMA managed RCHD program includes all direct, general, and depot level maintenance parts and support requirements while the equipment is in USAMMA's charge.

2) Mission Essential Equipment Training (MEET) and Clinically Operational Equipment Sets (COES). Repair parts support for the USARC managed MEET and COES equipment includes only depot level maintenance support parts requirements. Medical repair parts that are no longer available from commercial sources are the only exception. All repair parts excluding depot level maintenance support parts requirements and parts no longer available from

commercial sources should be obtained through the unit's supporting Regional Training Site, Medical (RTS-Med).

(2) **Reimbursable/Prepaid** (Unit/MACOM Funded)

**COMPO 6** (Army Prepositioned Stocks (APS)) All repair parts support for APS medical equipment must be funded by the APS program on a reimbursable or prepaid basis. The exception is APS that has been handed off to a unit participating in contingency operations, for which funding is provided by the theater.

**7. Class VIII Repair Parts Support Request Procedures.**

1. Typically, the medical maintenance support structure should coincide with the medical supply support structure. Medical maintenance personnel should attempt to utilize established supply channels to the maximum extent possible. Appropriate use of the supporting supply channel, i.e. MEDLOG, IMSA, SMLIM, assists in establishing consequential and future logistical support requirements.

2. Installation Medical Supply Activities (IMSAs) and Medical Logistics Battalions/Companies (MEDLOGs) providing sustainment level medical maintenance support should consider contacting USAMMA directly to obtain repair parts support.

3. Likewise, unit level maintenance organizations, which due to locality are experiencing difficulty or delays with conventional supply channels to the extent that equipment or unit readiness is significantly impacted, may consider contacting USAMMA to obtain repair parts support.

4. For sustainment level medical maintenance repair parts support, call USAMMA @ (801) 586-4947; dsn 586-4948.